

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Ending Spending Action Fund			FEC IDENTIFICATION NUMBER ▼ C C00489856		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y					
Full Name of Payee American Media & Advocacy Group			Date of Public Distribution/Dissemination 10 / 14 / 2014		
Mailing Address 815 Slaters Lane			Amount 1830133.00		
City State Zip Code Alexandria VA 22314		Transaction ID : SE.5878 Date of Disbursement or Obligation 10 / 09 / 2014			
Purpose of Expenditure media placement		Category/ Type 			
Name of Federal Candidate Mary Michelle Nunn			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought 3414380.96			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee American Media & Advocacy Group			Date of Public Distribution/Dissemination 10 / 14 / 2014		
Mailing Address 815 Slaters Lane			Amount 100000.00		
City State Zip Code Alexandria VA 22314		Transaction ID : SE.5879 Date of Disbursement or Obligation 10 / 10 / 2014			
Purpose of Expenditure media placement		Category/ Type 			
Name of Federal Candidate Mary Michelle Nunn			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought 3514380.96			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			1930133.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Nancy H. Watkins</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 10 / 16 / 2014		